

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
SEE DETERMINATION	<i>[Signature]</i>		09/19/02
CLIP CLASSIFIER		13	10-25-00
FORMALITY REVIEW	<i>[Signature]</i>	7176	11-16-02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- (Through number) Canceled
- + Restricted
- H Non-directed
- I Interference
- A Appeal
- O Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 100 claims or 10 objections  
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